

Application Data Sheet

Application Information

Application Type:: Regular
Subject Matter:: Utility
Suggested Group Art Unit:: 2876
Suggested Classification:: 235/379
Title:: CASH DISPENSING AUTOMATED BANKING
MACHINE WITH TILT OUT FASCIA
Attorney Docket Number:: D-1221 R5
Request for Early Publication?:: No
Request for Non-Publication?:: No
Suggested Drawing Figure:: 39
Total Drawing Sheets:: 97
Small Entity:: No
Petition included?:: No
Secrecy Order in Parent Appl.?:: No

Applicant Information

Applicant Authority Type:: Inventor
Primary Citizenship Country:: US
Status:: Full Capacity
Given Name:: Mark
Middle Name::
Family Name:: Douglass
Name Suffix::
City of Residence:: North Canton
State or Province Of Residence:: OH
Country of Residence:: US
Street of mailing address:: 1037 Bel Air Drive NW
City of mailing address:: North Canton
State or Province of mailing address:: OH
Country of mailing address:: US
Postal or Zip Code of mailing address:: 44720

Applicant Information

Applicant Authority Type:: Inventor
Primary Citizenship Country:: US
Status:: Full Capacity
Given Name:: James
Middle Name::
Family Name:: Booth
Name Suffix::
City of Residence:: Kimbolton
State or Province Of Residence:: OH
Country of Residence:: US
Street of mailing address:: 13223 Egress Road
City of mailing address:: Kimbolton
State or Province of mailing address:: OH
Country of mailing address:: US
Postal or Zip Code of mailing address:: 43749

Applicant Information

Applicant Authority Type:: Inventor
Primary Citizenship Country:: MX
Status:: Full Capacity
Given Name:: Pedro
Middle Name::
Family Name:: Tula
Name Suffix::
City of Residence:: North Canton
State or Province Of Residence:: OH
Country of Residence:: US
Street of mailing address:: 1118 Lindy Lane SW
City of mailing address:: North Canton
State or Province of mailing address:: OH
Country of mailing address:: US
Postal or Zip Code of mailing address:: 44720

Correspondence Information

Correspondence Customer Number:: 28995

Representative Information

| | |
|---------------------------------|-------|
| Representative Customer Number: | 28995 |
|---------------------------------|-------|

Domestic Priority Information

| Application:: | Continuity Type:: | Parent Application:: | Parent Date Filing:: |
|------------------|---|----------------------|----------------------|
| This Application | An application claiming the benefit under 35 USC 119(e) | 60/453,667 | 03/10/2003 |

Assignee Information

Assignee Name:: Diebold Self-Service Systems
Division of Diebold, Incorporated
City of mailing address:: North Canton
State or Province of mailing address:: OH